(ख) यदि हां, तो क्या देश के अन्य रसायन उत्पादक केन्दों से भी इसी प्रकार प्राकृतिक गैस नष्ट हो रही है ;

(ग) यदि हां, तो सरकार द्वारा इसकी कितनी वार्षिक हानि होने का अनुमान लगाया गया है ;

(घ) क्या सरकार उक्त हानि को समाप्त करने के लिए प्राथमिकता के आधार पर कोई योजना बनाने का विचार रखती है ; और

(ङ) यदि हां, तो इसका ब्यौरा क्या है ?

पेट्रोलियम और रसायन मंत्री (श्री एम०एस० गुरुपदस्वामी) : (क) इस समय पश्चिमी अपतटीय क्षेत्र में लगभग 13.6 मि० घन प्राकृतिक गैस प्रतिदिन जलाई जा रही है ।

(ख) देश के अन्य भागों में भी जहां कच्चे तेल का उत्पादन किया जाता है गैस जलाई जा रही है। इन क्षेत्रों में जलाई जा रही गैस की कुल मात्रा लगभग 3.3 मि० घन मी० प्रति दिन है ।

(ग) इस तरह से जलाई जाने वाली समस्त गैस की कुल कीमत 500/- रुपये प्रति 1000 घन मी० गैस के सांकेतिक मूल्य पर 300 रुपये वार्षिक होगा। तथापि 1989-90 के दौरान देश में मौजूदा मूल्यों के आधार पर इस गैस की कुल कीमत लगभग 800 करोड़ रुपये होगी ।

(घ) और (ङ) पश्चिमी अपतटीय क्षेत्रों में पर्याप्त इवेक्युएशन सुविधाओं की कमी के कारण गैस जलाई जाती है । अतिरिक्त सुविधाएं लगाने का प्रस्ताव है ताकि इस क्षेत्र को तट पर लाया जा सके और इसे उपभोक्ताओं को सप्लाई किया जा सके । इस समय हीरा क्षेत्रों को उरान स्थित तटवर्ती टर्मिनल से जोड़ने के लिए हीरा -उरान पाइप लाइन डाली जा रही है और इसके 1990-91 के दौरान चालू हो जाने की आशा है । इसके अलावा अन्य पाइपलाइनों और सम्बद्ध सुविधाओं के लिए भी योजना बनाई जा रही है ।

Treatment of AIDS patients at **the** AIIMS

795. SHRI HARVENDRA SINGH HANSPAL : Wll the Minister of HEALTH AND FAMILY WELFARE be phased to state :

(a) whether it is a fact that the All India Institute of Medical Sciences, New Delhi has recently taken a decision not to entertain AIDS infected patients till the AIDS unit is established ;

(b) whether the AIIMS had urged Government about two years back to grant clearance for the setting up of AIDS unit in the Institute ;

(c) if so, whether Government have since taken any decision in this regard ; add

(d) what other steps Government propose or contemplate to provide treatment to AIDS infected patients in the AIIMS till a full fledged unit is set up?

THE MINISTER OF HEALTH AND FAMILY WELFARE .(SHRI NILAMANI ROUTRAY) : (a) The All India Institute of Medical Science has temporarily suspended the admission of HIV positive cases from 6-2-90 in order to streamline, and update the treatment and management ' facilites for AIDS patients.

(b) and (c)- At the request of AIIMS amount of -*Rs20.00* lakh's has been sectioned, to. All. India Institute of Medical Sciences for purchase of equipment and for establislishment of AIDS unit)oa immediate-basis.

(d) Guidelines and procedure laid down for management of AIDS cases and associated arrangement for hospital infection control and handling and disposal of dead bodies are constantly under review Pending establishment of an AIDS unit interim arrangements are being made to provide medicare facilities in O PD/STD/Emergency clinics.

**Review of family planning Programmes**

796. SHRI HARVENDRA SINGH HANSPAL : Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) whether Government's attention has been drawn to the news item captioned 'India fails to achieve small family norm' as reported in the Indian Express of the 26th February, 1990 ;

(b) if so, whether it is a fact that despite huge financial allocation and three decades of subsidised family planning programmes, the target of small family norm has not been achieved;

(c) whether Government pro - pose to review the existing family planning programmes to make them more effective ; and

(d) if so, by when?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI NILAMANI ROUTRAY): (a) Yes, Sir.

(b) The long term goals to be achieved is to rech not production rate of unity by the year 2000 A.D. The demographic goals laid down as a part of the National Health Policy by the year 2000 A.D. are :—■

| | |
|---|---|
| (a) Crude Birth Rate | 21 per thousand |
| <b) Crude Death Rate | 9'per thousand |
| (c) Infant Mortality Rate | Below 60 par thousand live births.' |
| (d) Effective Couple Protection Rate (CPR) | 60% |

The corresponding goals to be reached by the end of 7th Plan are :—

| | |
|---|---|
| (a) Crude Birth Rate | 29. l per thousand |
| (b) Crude Death Rate | 10.4 per thousand |
| (c) Infant Mortality Rate | 90 per thousand live births |
| (d) Effective Couple Protection Rate | 42% |

As a result of implementation of Family Welfare Programme in the country, total fertility rate has come down from 6.4 in 1972 to 4.2 in 1986, birth rate has declined from 41.2 per thousand in 1961-71 to 31.3 in 1988 (Prov.), infant mortality rate has come down to 94 per thousand in 1988 (Prov.) from 139 in 1972 and couple protection rate has risen to 41.9% as on 31-3-89. More than 106 million births are estimated to have been averted so far. The programme has been able to create almost universal awareness about family planning both in rural and urban areas.

Some of the important factors inhibiting progress of family welfare programme in India are listed below :—

(i) In agricultural and traditional societies children especially male children are perceived to be a source of income generation for the family and are, therefore, viewed in terms of their economic value.

(ii) There is a strong preference for male children Which is linked to religious beliefs and old age security.